

## The Connecticut Women's Health Campaign

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### **CONNECTICUT WOMEN'S HEALTH CAMPAIGN**

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# **Expanding Health Insurance Coverage** to Uninsured Adults in Connecticut

The Connecticut Women's Health Campaign (CWHC) supports the expansion of HUSKY A and B to provide coverage for more low-income adults and the expansion of Municipal Employees Health Insurance Program (MEHIP) to offer affordable health insurance to small businesses.

#### The Problem

- There are few options available to assist uninsured adults in Connecticut. Estimates of the number of uninsured adults in Connecticut vary, depending upon the method used to gather data and make the estimation. For example, the Connecticut Office of Health Care Access used a telephone survey in the fall of 2001, and it revealed that 7.3%, or 150,800, civilian, non-institutionalized working-age adults were uninsured at the time of the survey. It also showed that dental coverage was not as widespread as health care coverage. Three-quarters of all working age adults had dental insurance, but 20% of those with health insurance did not have dental coverage. In a report prepared by The Lewin Group on behalf of a health care foundation in Connecticut, their analysis of the 2001 Current Population Survey data from the U.S. Census Bureau showed that approximately 8.5% of adults aged 19 to 64, or 253,000 individuals, were uninsured in our state.
- Most uninsured adults are working, but are either unable to afford the health insurance offered by their employer, or hold jobs where no health insurance is offered. In fact, OHCA reports that 68% of all uninsured adults are employed. They also report that the proportion of uninsured adults generally declines as incomes increase, but that there are some exceptions which suggest the income "cliffs" where eligibility for government programs end. For example, the rate of uninsured adults ranges from 22% for those with incomes below \$10,000 per year to 2% for those with incomes above \$75,000 per year. However, the group with the highest rate of uninsured 24% -- is adults with incomes between \$20,000 and \$30,000 per year. These are workers in low-wage occupations or part-time jobs.
- While Connecticut has expanded coverage for low-income children up to the 300% of the federal poverty level, utilizing federal "CHIP" funds (Child Health Insurance Program) through the

HUSKY program, there is no comparable program available to assist most low-income adults under the age of 65. While some very poor or medically disabled adults qualify for coverage under Medicaid (HUSKY A), most working adults do not qualify for this assistance.

#### What Can Be Done?

- Connecticut can expand health insurance for adults through a combination of federal and state programs. Connecticut can apply for certain federal waivers and expand other state programs so that more uninsured adults can have the opportunity to purchase affordable health insurance. We recommend the following options:
  - (A) Apply for a federal waiver through the S-CHIP program to provide insurance coverage for all parents up to 300% of the federal poverty level;
  - (B) Apply for a federal waiver to provide insurance coverage up to 300% of the federal poverty level for pregnant women for up to two years after a pregnancy;
  - (C) Apply for a federal waiver to provide insurance coverage for family planning, including STD diagnosis and treatment, for adults up to 300% of the federal poverty level; and
  - (D) Permit the state Comptroller to allow small business employers to obtain insurance coverage through the Municipal Employees Health Insurance Plan (MEHIP).
- These proposals would allow Connecticut to expand health insurance coverage to various target populations by utilizing Medicaid funds at a 50% federal reimbursement rate; SCHIP funds at a 65%-90% federal reimbursement rate; and the MEHIP Plan which is not a government subsidized program, but uses the purchasing power of the state to secure affordable health insurance.
- Other states have utilized some of these options. For example, since the mid- 1990s, states have used Section 1115(a) Medicaid Demonstration waivers to cover family planning services for certain populations. They are attractive because the federal government pays 90% of the costs for services, while the state pays 10%. Most family planning waivers are good for a five-year period. Twelve states are currently operating statewide family planning waivers [Arizona, Arkansas, California, Delaware, Florida, Maryland, Missouri, New Mexico, New York, Oregon, Rhode Island, and South Carolina]. Six more states are in the process of applying for a family planning waiver and five additional states are considering it.

#### For additional information, contact:

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Children's Health Council 60 Gillett Street, Suite 204 Hartford, Ct 06105 860-548-1661 www.childrenshealthcouncil.org Health Care for All Coalition 139 Vanderbilt Avenue West Hartford, CT 06110 860-947-2200 gvivier@ccag.net

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<sup>&</sup>lt;sup>i</sup> Office of Health Care Access, State of Connecticut, Who are the Uninsured? September 2002.

<sup>&</sup>lt;sup>ii</sup> The Lewin Group, *Health Spending, Coverage and the Uninsured in Connecticut*, prepared for the Connecticut Health Advancement and Trust, Inc., July, 2002.